

# STATE OF MAINE

## BOARD of BARBERING AND COSMETOLOGY

### Application for Booth License



Department of Professional and Financial Regulation

Office of Licensing and Registration  
Board of Barbering and Cosmetology

35 State House Station

Augusta, ME 04333

Telephone: 207-624-8579

TTY/HEARING-IMPAIRED: 888-577-6690

FAX: 207- 624-8637

Email [cathleen.a.bitz@maine.gov](mailto:cathleen.a.bitz@maine.gov)

## APPLICATION FOR BOOTH LICENSE

Attached is information and application form to apply for a booth license. Please refer to the Maine State Barbering and Cosmetology Licensing Laws and Rules for more information when completing your application.

A person, firm or corporation leasing/renting space within a licensed establishment to operate an independent business must apply for a Booth license. A Booth license is subject to license fees and compliance with applicable rules to operate an independent business in the same manner as the licensed establishment.

The Maine State Board of Barbering and Cosmetology does not regulate the employee/employer relationship between booth renters and establishment owners for tax purposes. If you have any questions regarding this relationship, please call the IRS at 1-800-829-3676.

### HOW TO APPLY FOR A BOOTH LICENSE

1. Complete and submit the **Application for Booth License** with the following information:
  - a. Fee of \$60.00 made payable to the **Treasurer, State of Maine**. (The \$60.00 fee covers a \$20.00 application fee and \$40.00 initial license fee.)
  - b. Directions to the shop where you are renting space. Make directions as clear as possible noting any identifying signs landmarks or structures that will assist in locating your establishments.
  - c. Floor plan. Please provide a floor plan of the shop where you will be operating your business and note specifically the space in the shop that you will be renting to operate your booth. Mark entrances, exits, purpose of each room or area, and location of the required public rest room.
  - d. Checklist.

Upon receipt of the completed application, an inspector will determine if an inspection is required. If an inspection is required, you will be notified by telephone as to the date of that inspection. If the booth does not need an inspection, your license will be issued and sent to you.

You may begin working as a booth renter only once your application for a booth license is approved. Your license will arrive in approximately two weeks. Your booth license, as well as your license to practice must be conspicuously displayed.

Although any individual may apply for a booth license, only licensed persons may work in that booth. A booth license is another business inside a licensed establishment and is not controlled by the owner of the establishment. A person holding a trainee or temporary work permit license must have direct supervision at all times when practicing. Because a booth license is considered a separate business within another business, a trainee or person on a temporary work permit who owns a booth may not work independently and therefore may not operate a booth without employing a licensed person to supervise them.

Since Booths are independent from the licensed establishment, they are solely responsible for the licensing of their booth and personal licenses as well as complying with all safety and sanitation rules identified in Chapter 3 of the Board's rules.



STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL  
AND FINANCIAL REGULATION  
BOARD OF BARBERING & COSMETOLOGY  
35 STATE HOUSE STATION  
AUGUSTA, MAINE  
04333-0035  
TELEPHONE: 207-624-8579  
TTY/HEARING IMPAIRED: 888-557-6690  
FAX: 207- 624-8637

John Elias Baldacci  
GOVERNOR

ANNE L. HEAD  
DIRECTOR

### **Application for Booth License**

**FEE:** \$60.00 (Includes \$20.00 application fee and \$40.00 license fee) Make check payable to **Treasurer, State of Maine**. If paying by credit card, please submit the enclosed authorization form with your application.

#### **Notice regarding Social Security Number Disclosure**

The following statement is made pursuant to the Privacy Act of 1974 section 7 (B). Disclosure of your social security number is mandatory. Solicitation of your social security number is solely for tax administration purposes pursuant to 36 MRSA section 175 as authorized by the Tax Reform Act of 1976 (42 USC section-405 (C) (2) (1)). Your social security number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your social security number and it shall be treated as confidential tax information pursuant to 36 MRSA section 191.

#### **Notice regarding Public Information**

This application is a public record for purposes of Maine's Freedom of Access Law, 1 MRSA §401, et seq. Public records must be made available to any person upon request. Information that you supply as part of this application (except your Social Security number) is public information. Other licensing records to which this information may later be transferred are also considered public records. Where permitted by law, your name, license number, contact address and other information listed on this application may be posted on the State's website.

#### ***FOR OFFICE USE ONLY ↓→***

1422-\$40.00/1446-\$20.00

CN-

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

#### **Date Scheduled for Inspection:**

#### **Contact and date:**

☐ **Inspection not needed – Last Date of ES Inspection:**

**EB-**

**Affiliate to: ES;**

#### **Check type of Booth License you are applying for:**

☐ New (Initial)

☐ Second Booth

Do you hold a current license? ☐ Yes ☐ No

If yes, what type? (**check all that apply**)

Cosmetologist:

Lic# \_\_\_\_\_ Expires \_\_\_\_\_

Barber:

Lic# \_\_\_\_\_ Expires \_\_\_\_\_

Manicurist:

Lic# \_\_\_\_\_ Expires \_\_\_\_\_

Aesthetician:

Lic# \_\_\_\_\_ Expires \_\_\_\_\_

☐ Change of Location: (List previous Booth license number and address below:

License #:

Address:

If you have another booth or shop license, do you want to discontinue that booth or shop license? ☐ YES ☐ NO

If so, please indicate by writing the shop name and booth or shop number below:

### ***LICENSEE INFORMATION***

FULL NAME OF BOOTH OWNER:	Last	First	MI
Social Security Number: OR Federal Identification Number(FEIN):	SS#		
	FEIN #		
DATE OF BIRTH: →			
DATE YOU WISH TO OPEN FOR BUSINESS: <i>(Reminder, you may not provide any services until an inspection has been conducted, if necessary, and you are approved for licensure.)</i>	<b>In the event that inspection may need to be done, what date will you be ready?</b>		
	<b>What date do you want an Inspection?</b>		

### ***ESTABLISHMENT INFORMATION***

<i>Owner of Establishment where Booth will be located:</i> →	Last	First	MI
<i>Name of Establishment where booth will be:</i> →			
<i>Physical Location of Establishment:</i> →	Street		
	City/State		
	Zip	County	
<i>Mailing Address Establishment:</i> →	Street		
	City/State		
	Zip	County	
<i>License Number of Establishment:</i> →			
<i>Exp. Date:</i> →			
<i>Establishment Telephone #:</i> →			

### CHANGE OF BOOTH LOCATION

**If you are relocating your booth to another location, this section must be completed.**

Please, provide the following information relating to your pervious location

<i>Owner of Establishment where your Booth was located:</i> →	Last	First	MI
<i>Name of Establishment where your Booth was located:</i> →			
<i>Physical Location of the Establishment where your Booth was located:</i> →	Street		
	City/State		
	Zip		
<i>Mailing Address of the Establishment where your Booth was located:</i> →	Street		
	City/State		
	Zip		
<i>License Number of the Establishment where your Booth was located:</i> → →	License #		
	Expiration Date		

### ENDORSEMENT FOR BOOTH APPLICATION

**This application must be signed by both the Booth Renter and the Establishment Owner.**

By filing this application with the Board of Barbering and Cosmetology, I understand that a booth license is a license obtained by an individual to run an independent business within a licensed establishment. I understand that a booth renter is not an employee of the licensed establishment and that I am an independently operated business and am subject to all requirements governed by the Board of Barbering and Cosmetology, and any other governing state or federal agency.

\_\_\_\_\_  
Signature of Booth Renter

\_\_\_\_\_  
Date

I, the owner of the establishment that this booth is located in, understand that the person renting this booth is an independently operated business and is not under my employ. I do not control the daily operations of the booth, and I have a ☐written or ☐verbal contract with the individual regarding the rental agreement.

(check box which applies)

\_\_\_\_\_  
Signature of Establishment Owner

\_\_\_\_\_  
Date

All applications and required documentation must be completed in full and submitted to our office before an inspection will be scheduled. Applications that are missing information or supporting documentation will be returned.

Please submit your application as early as possible to allow adequate time for your Booth Approval. You may not operate your booth until this office has approved you. If an inspection is required, you will be notified and scheduled for an inspection. Inspections may take up to two weeks to be approved. We are not responsible for advanced bookings.

**BOARD OF BARBERING & COSMETOLOGY**  
(This form must be completed and submitted with your application)

**Directions to Establishment**

Give directions to your establishment from Augusta:

Make directions as clear as possible, noting any identifying signs, landmarks or structures that will assist in locating your business.

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**Floor Plan of Establishment**

Please provide a floor plan of your establishment. Make note of entrances, exits, purpose for each room or area and location of the public restroom. **Reminder:** The establishment must have a utility sink or shampoo bowl, in addition to the sink in the restroom. **Applicant for a Booth license** should identify the space where his/her booth will be located.

**CONTACT PERSON:**

**TELEPHONE NUMBER:**



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### AUTHORIZATION OF CREDIT CARD PAYMENT

Fees owed to this Department may be paid by the use of a credit card. If you wish to pay your fee(s) with your credit card, please complete this form and send it with your application. Payment through credit cards will not be processed without this authorization form.

<b>Name:</b> (applicant fees being paid for)		
<b>Mailing Address:</b> (applicant fees being paid for)		
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>
<b>County:</b>		<b>Telephone #:</b>
<b>Name of cardholder:</b> (if other than applicant)		
<b>Mailing Address:</b> (if other than applicant)		
<b>City:</b>	<b>State:</b>	<b>Zip Code:</b>

I authorize the State of Maine, Department of Professional and Financial Regulation, Office of Licensing and Registration to charge my:

☐ Visa ☐ MasterCard \_\_\_\_\_

Card number \_\_\_\_\_  
Expiration date: \_\_\_\_/\_\_\_\_/\_\_\_\_ in the amount of: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### SELF INSPECTION CHECKLIST FOR BOOTHS

(207)624- 8579 (OFFICE PHONE)



FAX: (207)624-8637

Email - [cathleen.a.bitz@maine.gov](mailto:cathleen.a.bitz@maine.gov)

888-577-6690 (HEARING IMPAIRED)  
OFFICES LOCATED AT: 122 NORTHERN AVENUE, GARDINER,  
MAINE

**Your booth must comply with all items marked on this list as well as any other rules pertaining to booths licensed by the board. It is recommended that you read chapter 3 of the boards rules to ensure that your booth meets all requirements. By checking each box on this form, you are verifying that your booth has met each requirement.**

## **GENERAL RULES**

- ☐ Valid licenses, registrations and permits are conspicuously displayed for public view and inspection in the booth.
- ☐ The name of the licensee, license number and expiration date is visible at all times.

## **EQUIPMENT**

- ☐ One cabinet for storing clean towels
  - ☐ Adequate supply of clean towels
  - ☐ Dry sanitizing agent in cabinet
  - ☐ Cabinet must close completely
- ☐ One cabinet or adequate shelving for storing supplies
- ☐ Container for soiled towels.
- ☐ Covered waste receptacle.
- ☐ One wet sanitizer unit of adequate size with appropriate sanitizing agent
  - ☐ Wet sanitizers shall contain suitable chemical germicide solution, which shall be bacteriological effective. The solution must be changed regularly. Booths using all disposable tools, implements, applicators, etc are not required to provide wet sanitizers)
- ☐ Sufficient tools and implements necessary for services being rendered.
- ☐ Adequate and appropriate chairs for services being provided.

## **BLOOD BORNE FLUID CONTAMINATION**

- ☐ Booth has a sealable plastic bag for disposal of material being exposed to blood and/or body fluids.
- ☐ Booth has a puncture proof container for disposable sharp objects that come in contact with blood or other body fluids. The container is strong enough to protect the licensee, client and others from accidental cuts or puncture wounds that could happen during the disposal process.

**By signing this check list, I verify that I have read all of the Maine Board of Barbering & Cosmetology Laws and Rules, including Chapter 3 which describes the safety and sanitation requirements for shops. I affirm that the items checked on this list have been installed and completed and all requirements for opening my booth have been met. This list is not inclusive and not intended to circumvent following established/booth laws and rules. I understand the Maine Board of Barbering & Cosmetology will rely upon this information for issuance of my license and that sanctions may be imposed including suspension and revocation of my license if the information being reported is found to be false.**

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Signature

Date

Signature and date must be on this form in order to process your application

If your application and supporting checklist is accepted, your shop/license will be issued which authorizes you to open for business upon receipt of the license. Your shop will be formally inspected within 60 days from your license issue date.